Lear Margaret Carter,

My name is Noel Neff, an inmate at low Security Correctional Institution Allenwood in Pennsylvania. I am writing to you today regarding my attempt to obtain torma pauperis status in the district court. I am enclosing the completed "Affidovit to Accompany Motion for Leave to Appeal in Forma Pauperis" which your office recently mailed to me.

I apologize for the delay in the completed form reaching you. Because of my transfer from the Plymouth (Mass) County Correctional Facility to the Federal Bureau of Prisons in early February, I spent almost one month as an "in-transit" inmate, first spending three weeks at MDC Brooklyn before finally arriving at Allenwood, where I was required to spend my first week in administrative detention ("the hole") Juntil bed space opened up on the compound in early March. I was essentially "out of the loop" in terms

for appeals process. Meanwhile, my attorney of second - Francis L. O'Reilly of Fairfield, Conn. - Tassistance since By Bal sentencing on Dec. 13, 2006. The tottom lies Bethat I no longer can afford his services and he feels no moral obligation to help me further. Obviously I intend to proceed without Mr. O'Reilly's resources. I do not want to default on my appeal. I am responding to your request directly before the April 17, 2007, deadline so as to avoid the possibility of dismissal of my appeal. On the enclosed affidavit, I have attempted to provide your office with the necessary information needed to determine my financial court-appointed public defender who specializes Im federal appeals cases, to represent me.

On the affidavit, I found some of the questions to be ambiguous and difficult to answer, primarily because I am an unmarried male with no dependents and no remaining outside sources of income. Because of two recent stretches of unemployment, I have incurred credit-card dettexceeding \$45,000 - debt that only will increase during my remaining 52 months of incurreration.

My siblings have pitched in to provide funds for my institutional account as well as my bank joint-checking account, allowing for my minimum financial obligations (life insurance, credit-card payments, mobile home rent, etc.) to be met.

I have no assets to sell off at this point that would enable me to pay a private attorney. Therefore, I place myself at the merry of the clerk of the court of appeals to give me formal payer is status for the purpose of me obtaining a public defender who will represent me throughout the oppeals overess.

If I have reglected to provide your office with sufficient information in this matter, please notify me directly so that I may personally address your concerns.

Finally, I apologize for not using a typewriter to construct this letter. That would have meant a delay in you receiving this correspondence — a risk I could not afford.

Thank you for your consideration. I look farward to your response.

Respectfully,

NOEL NEFF

DC # 05-cr-10184 No. 07-1071

Affidavit to Accompany Motion for Leave to Appeal in Forma Pauperis

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District Court No. 05-cr-10184 Appeal No. 07-1071	FILED IN CLERKS OFFICE US COURT OF APPEALS FOR THE FIRST CIRCUIT
UNITED STATES Appeller, NOEL NEFF Defendant, Appellant.	
Affidavit in Support of Motion	Instructions
I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct.(28 U.S.C. § 1746; 18 U.S.C. § 1621.) Signed:	Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number. Date: 4/8/07
My issues on appeal are:	
1. For both you and your spouse estimate the aver	age amount of money received from each of the

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 months		Amount expected next month		
Employment	You \$	Spouse \$_N/A	You \$	Spouse \$_N/A	
Self-employment	s 500	\$ N/A	\$ <u>O</u>	<u> </u>	
Income from real property (such as rental income)	\$_ <i>O</i>	\$_N/A	<u>\$_0</u>	\$ <u>N/A</u>	
Interest and dividends	<u>\$_O</u>	\$_ N/A	<u>\$ 0</u>	S_N/A	

Income source		Average monthly amount during the past 12 months		Amount expected next month	
Gifts	You \$_75	Spouse \$N/A	You \$_ 00	Spouse \$N/A	
Alimony	s	s_ N/A	s	\$N/A	
Child support	<u>\$</u>	s_ N/A	<u>\$O</u>	\$N/A	
Retirement (such as social security, pensions, annuities insurance	\$ <u> </u>	\$ <u>N/A</u>	sO	\$ <u>N/A</u>	
Disability (such as social security, insurance payment	\$ <u> </u>	\$ <u>N/A</u>	\$ <u>0</u>	s <u>N/A</u>	
Unemployment payments	s	\$ <u>N/A</u>	\$ <i>O</i>	\$ <u>N/A</u>	
Public-assistance (such as welfare)	<u> </u>	\$ <u>N/A</u>	\$ <u> </u>	\$ N/A	
Other (specify):	<u> </u>	\$ N/A	s <i>O</i>	s_ N/A	
Total Monthly income:	\$ <u>575</u>	<u>\$_N/A</u>	<u>\$_100</u>	\$ <u>N/A</u>	
2. List your employment his other deductions)					
<u>.</u> .	iress Dates of Emplo mford, CT Feb. 2001 - Ju			nonthly pay 500	
mysportsquru-com Fo	airfield, CT	June 1999-1	bri 2000 \$4	200	
St. Petersburg Times 5	t. Petersburg, FL	Nov. 1997-J	ione 1999 \$ 3,	500	
	yment history, mos not marries Idress			y pay is before	

Financial Institution	Type of Account	Amount you have	Amount your spouse ha
Wachovia	Joint checking	< \$ 1,0∞	s_ N/A_
		\$ 0	\$ <u>N/A</u>
		\$ <u> </u>	\$ N/A
officer showing all reconstitutional accounts.	you must attach a staten eipts, expenditures, and If you have multiple ac ttach one certified state	balances during the l counts, perhaps beca	ast six months in your use you have been in
My caseworked the statement	t to your offi ir values, which you or you	this request. :	I will forward ppleted.
Home Mobile home (\$30 japire Drive	1,000) N/A		Vehicle #1 (Value) by year: 1996 Saturn (SL1
Fainesville, FL			ation#: N/A
Notor Vehicle #2 Nake & year: 2003 Honda Nodel: CIVIC SI	(Value) Other assets	(Value) Other	assets (Value)
egistration#: N/A			
State every person, busin Person owing you or you	ness, or organization owing ar Amount owed to		ney, and the amount owed. It owed to your spouse
spouse money N/A			

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

Rent or home mortgage payment (include lot rented for mobile home) Are any real estate taxes included? Yes I No Is property insurance included? Yes I No	You \$_600_	Spouse \$ <u>NJA</u>	
Utilities (electricity, heating fuel, water, sewer, and Telephone)	\$100	\$ <u>N/</u> A	
Home maintenance (repairs and upkeep)	<u>\$ 50</u>	s_ N/A	
Food	\$ <i>O</i>	s 12/A	
Clothing	\$_ <i>O</i>	s_ N/A_	
Laundry and dry-cleaning	\$ <i>Q</i>	\$ N/A	
Medical and dental expenses	\$_ <i>O</i>	\$ <u>N/A</u>	
Transportation (not including motor vehicle payments)	\$_ <i>O</i>	\$ N/A	
Recreation, entertainment, newspapers, magazines, etc.	sO	\$ <u>N/A</u>	
Insurance (not deducted from wages or included in Mortgage payments)	\$ <u> </u>	\$_N/A_	
Homeowner's or renter's	s	s N/A	
Life	s <u>80</u>	s N/A	
Health	s_ D	s_ N/A_	
Motor Vehicle	s_ <i>O</i>	\$ <u>N</u> /A	
Other: N/A	sO	s N/A	
Taxes (not deducted from wages or included in Mortgage payments)(specify):	s	\$ <u>N/A</u>	
Installment payments	<u>\$_0</u>	\$ <u>N/A</u>	
Motor Vehicle	<u>\$_</u>	\$ <u>N/A</u>	
Credit card (name): Multiple accounts	s 500*	s_ N/A	* minimum payment total for
Department store (name):	\$_ <i>O</i>	s_ N/A	5 cards
Other:	s_O	s_ N/A_	

Alimony, maintenance, and support paid to others	\$ <u> </u>	\$ N/A
Regular expenses for operations of business, profession, or farm (attach detailed statement)	\$_6	\$_ N/A
Other (specify): NA	s <i>N</i> /A	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>1,330.</u> ∞	\$_N/A
9. Do you expect any major changes to your monthly incomduring the next 12 months? □ Yes ☑ No If yes, describe on	ne or expenses in your an attached sheet.	assets or liabilities
10. Have you paid — or will you be paying — an attorney case, including the completion of this form? ☑ Yes ☐ No	any money for service	s in connection with th
If yes, how much? \$ 37,500 * for	r trial preparati	pr
If yes, state the attorney's name, address, and telephone num Francis L. O'Reilly 857 Ruane St. Fairfield, CT 06824 (203) 3	mber: 19-0707	
11. Have you paid — or will you be paying — anyone othe typist) any money for services in connection with this case, □ Yes ☑ No	er than an attorney (su	
If yes, how much? \$		
If yes, state the person's name, address, and telephone number N/A		
12.Provide any other information that will help explain wh	v vou cannot pay the d	acket fees for your
appeal. In order to pay my \$60,000 in	-	

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appeal. In order to pay my \$60,000 in pretrict attorney's fees (to two lawyers), I exhausted my \$83,000 retirement savings. I have no more resources to top into to pay for my appeal. My credit-card debt exceeds \$45,000. My name remains on a joint-checking account of which less than \$1,000 of the balance is mine.

13. State the address of your legal residence. I no longer have a permanent residence	
Your daytime phone number: () N/A	
Your age: 48 Your years of schooling: 16	